

American Academy of Anesthesiologist Assistants | American Society of Anesthesiologists In collaboration with Commission on Accreditation of Allied Health Education Programs

## CAAHEP ACCREDITATION SITE VISIT | Documents for Site Visit

The Self Study Report has been submitted and your site visit is scheduled. You are eagerly anticipating an informative time with the three site visitors who are a combination of anesthesiologist assistants, physician anesthesiologists, and deans. You want to be well prepared, so where do you start?

Effective preparation for the site visit will facilitate the site review, ensure that your program is adequately represented by providing documentation of your processes, answer site reviewer questions, and significantly reduce your stress level. Having all potential documents available for review also demonstrates the degree of organization of your program. Whether this is your first site visit, or you are a seasoned veteran, the following checklist will assist you in your preparations.

The following pages are a list of documents the Program must make available for the site visit, all organized by the Standard Reference (i.e., II.A., or III.C., etc.). These documents are in addition to documents identified in the Executive Analysis (EA). There are two primary methods of organizing the materials: either in 1) a file box or crate with labeled hanging file folders or 2) electronic format. Either way is acceptable for the residential/in-person site visit. The electronic format is used for the virtual site visit. For the residential/in-person site visit, the documentation remains available in the private conference room; for the virtual site visit, the documentation is available in the ARC-AA-established Dropbox folder. Some standards will require several years of data, such as summary tracking documentation for graduated cohorts. In these cases, you will need to label each year with a separate divider or folder. Additionally, site visitors will pull student files at random for review and be prepared to provide additional examples if requested.

This document is the list of required documentation. Many of the accreditation standards will be verified through conversations and interviews with different people during the site visit. If items were provided in the Self-Study Report, then it is not necessary to provide another copy. If the document was not supplied with the original submission of the Self-Study Report and is noted in the EA, then provide it for the site visit.

Once you have organized the boxes or notebooks, have another staff member review the contents against the checklist. Are all the requested materials present and current? Are the copies legible? Do the materials address the 'evidence' column in the *Site Visit Report*? Make sure that your key faculty members are familiar with the documents on hand and can answer all questions in their area of responsibility.

You should now be ready for the site visit so relax and engage the site visitors in dialog about your program!

CAAHEP Standard			Documentation List	
<ul> <li>Documents for Site Visit and identify the location of each item. (This document is sent to the program electronically prior to the site visit.)</li> <li>Completed Site Visit Schedule copies. Include as separate documents:</li> </ul>				
Lis Lis Lis Lis Lis Lis Lis Prograr Studen Be prep ARC-AA ARC-AA	st of st of st of st of st of m up t files bared Ann A Prop	s: site visitors will pull student files at random I to provide additional examples if requested: ual Reports since last accreditation site visit o gress Reports since last accreditation site visit	vas submitted that the site visitors may not have received. for review. exams, lesson plans, etc. r 5 years, whichever is longer.	
Standard I.	- -	-		
I.B.		Minutes of Consortium meetings (if applicat Consortium Agreement and Bylaws (if application)		
Standard II. Program Goals				
II.A.			y include programs presented at a college, internal program in-services, conferences relating to clinical care or instructional techniques)	
II.B.		Advisory Committee meeting minutes since	submission of Self-Study Report	
Standard III	. Cur	riculum		
III.A.		Budget for the current year that includes pe	rsonnel, supplies, equipment, and rental costs (if applicable).	
PROGRAM DIRECTOR				
III.B.1.a.1)		Faculty meeting minutes (recommend a min	imum of the last 2 years)	
III.B.1.a.4)		Preceptor training manual		
III.B.1.a.4)		Rosters documenting preceptor training wit	h dates and names.	
III.B.1.a.4)		Evaluations of clinical rotations by students longer	since the last accreditation site visit or the last 3 years, whichever is	
III.B.1.a.4)		Evaluation of preceptors by students since t	he last accreditation site visit or the last 3 years, whichever is longer	
MEDICAL DIRECTOR				
III.B.2.a.		•	nsibilities: organize, administer, continuously review, plan, and develop of clinical education component of the program	
CURRICULU	М			
III.C.1.		Course schedule for the program (include cla these components)	assroom, lab, and clinical and include a total number of hours for each of	
III.C.1.		Clinical rotation schedule		
III.C.1.		Lesson plans for each topic/class session (re <i>Note:</i> Site visitors may request specific topic		
III.C.2.		Sample of case logs that have been audited the review/evaluation process	by a faculty member with feedback to the students that demonstrates	

CAAHEP Standard		Documentation List		
III.C.2.		Documentation of required student minimums for clinical contacts and procedures with documents that all graduates have met those minimums (recommend a minimum of at least 3 graduating classes).		
III.D.		Evaluations of faculty and guest speaker presentations by students (recommend a minimum of at least 2 classes)		
III.D.		Final evaluations of the course by students since the last accreditation site visit or the last 3 years, whichever is longer		
III.D.		Other program action plans or analysis such as a Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis. All assessments should be accompanied by a plan to address issues identified		
Standard IV	. Stu	dent and Graduate Evaluation/Assessment		
IV.A.1.		Documentation of periodic cognitive evaluation of each student.		
IV.A.1.		Documentation of periodic <b>psychomotor</b> evaluation of each student.		
IV.A.1.		Documentation of periodic affective evaluation of each student.		
IV.A.1.		Documentation of completed <b>psychomotor</b> evaluation at the end of $1^{st}$ year.		
IV.A.1.		Documentation of analysis of examination items and actions taken to improve the items. Must include reliability and validity statistics.		
IV.A.1.		Completed final course examinations and final comprehensive exams for graduate from the most current 3 years.		
IV.A.2.		Documentation of grades for students and graduates for at least 3 years.		
IV.B.		NCCAA certification testing results since last accreditation site visit or the last 3 years, whichever is longer.		
IV.B.		Graduate and employer surveys since last accreditation site visit or 3 years, whichever is longer.		
IV.B.		Annual program resource surveys completed by the students and program personnel, including Program Director, Medical Director and Advisory Committee members since last accreditation site visit or the last 5 years, whichever is longer.		
Standard V. Fair Practices				
V.A.		Department or program policies manual.		
V.A.1.		Course catalog and course schedule.		
V.A.2.		Completed student application packet to the program.		
V.F.		All signed clinical affiliation agreement with a college or other organization (if applicable)		